

EXHIBIT 2

----- From: 2263373 Page: 3/3 Date: 12/29/2007 8:53:49 AM  
DEC-28-2007 15:21 FROM:HARRIS AND RUBLE 3239313366 TO:2263373

P.2

1 Catherine Tremblay declares under penalty of perjury as follows:

2 (1) If sworn as a witness, I could competently testify to each and every fact set  
3 forth herein from my own personal knowledge.

4 (2) I am the Plaintiff in this action and submit this Declaration in support of my  
5 efforts to prosecute this case to a successful conclusion.

6 (3) On or about December 18, 2006, I was hired to work for Chevron Stations,  
7 Inc., in California. Copies of some of the wage statements that I was issued in  
8 connection with my work as a service station attendant are attached as Exhibit 1.

9 (4) During my employment with Chevron, I routinely worked "off the clock" for a  
10 great deal of time in excess of that for which I was compensated. I have never been  
11 compensated for these overtime hours, or for wages to which I am entitled on account of  
12 the Defendant's violation of the meal break and rest period laws. After my work for  
13 Chevron came to an end, I was not provided my last paycheck from Chevron until long  
14 after the next regularly scheduled payday.

15 (5) In connection with this lawsuit, I feel as though I can be a good representative  
16 of others who have worked for Chevron. My main concern is that all employees be  
17 treated fairly.

18 (6) As a class representative, if a class is certified, I understand that I will be  
19 acting as a representative of other, unnamed class members and that, as such a  
20 representative, I owe a duty of good faith to the unnamed class members and I will not  
21 act just in my own self-interest.

22 (7) My interest in prosecuting the lawsuit is to secure compensation for all of the  
23 members of the class for the Defendants' failure to comply with state and federal labor  
24 laws. I have not been promised any special monetary reward or treatment for acting as a  
25 class representative. I have no interest adverse to the members of the class as a whole  
26 and I believe that my individual claims are typical of the claims of the members of the  
27 class as a whole.

28 (8) I have already taken an active part of this litigation by conferring with counsel

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1 and assisting in gathering information for the prosecution of the lawsuit. I intend to  
2 continue to take an active part in the litigation, to give a deposition, to participate in  
3 settlement procedures such as mediation and to testify and otherwise participate in the  
4 trial of this case. If there is a settlement of the case, I understand that my fiduciary  
5 obligations to the class will continue until all settlement procedures are concluded and  
6 the settlement funds are distributed to the class members.

7 I have read the foregoing and the facts set forth herein are true and correct of my  
8 own personal knowledge. Executed December 29, 2007, in the County of Merrimack,  
9 State of New Hampshire.

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11  
12 *Mrs. Catherine Tremblay*  
13 Catherine Tremblay  
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VERIFY DOCUMENT AUTHENTICITY - COLORED AREA MUST CHANGE IN TONE GRADUALLY AND EVENLY FROM DARK AT TOP TO LIGHTER AT BOTTOM

**Chevron**P.O. Box 3009  
Bothell, WA 98041-3009

01/19/2007

D608568

**ADVICE OF DEPOSIT - NON-NEGOTIABLE****\$286.51**

775 1758

BAJA-1-2741

CATHERINE TREMBLAY  
710 CORTE BLANCO  
ROHNERT PARK, CA 94928

Not Valid After 6 Months

**NON-NEGOTIABLE**

THE ORIGINAL DOCUMENT HAS AN ARTIFICIAL WATERMARK ON THE BACK. HOLD AT AN ANGLE TO VIEW WHEN CHECKING THE ENDORSEMENT.

REMOVE DOCUMENT ALONG THIS PERFORATION

Employee	ID	Social Security	Status	Exemptions/Allowances	Number		
CATHERINE TREMBLAY	884012	X00-30-9148	Single	US-078 CA-010	Deceased		
Code	Paygroup	Division	Department	Hire Date	Period Start	Period End	Pay Date
CHEVRON	2	1758		12/19/06	01/06/07	01/14/07	01/19/07

Earnings	Rate	Units	Current	Year To Date	Direct Deposit Accounts	Amount
Stat. Differential Field	9.0000	40100	360.00	1,008.00	Checking	286.51
<b>Total</b>			<b>360.00</b>	<b>1,008.00</b>		

Taxes		
Federal Income Tax	34.12	108.71
Social Security (FICA)	22.32	62.58
Federal Medicare	5.28	14.82
California Income Tax	4.82	12.42
California State Disability	2.18	6.05
<b>Total</b>	<b>73.48</b>	<b>202.30</b>

W2 Gross 360.00 1,008.00

Net Pay 286.51

Your GCE number is: 8133

REMOVE DOCUMENT ALONG THIS PERFORATION

Employee	ID	Social Security	Salary	Department/Manager	Number		
CATHERINE TREMLAY	10001	XXX-XX-XXXX					
Code	Payroll	Division	Department	Has Date	Period Start	Period End	Pay Date
CHEVRON	2	1700		12/15/07	01/01/08	01/15/08	01/15/08
Earnings	Rate	Units	Current	Year To Date			
Regular Hours	\$ 8.00	34.25	274.00	274.00			
Shift Differential Pay	\$ 0.00	10.00	0.00	0.00			
Overtime - 1.5x	12.00	0.00	0.00	0.00			
Total			274.00	274.00			
Taxes							
Federal Income Tax			38.30	281.70			
State Security (FICA)			21.87	128.33			
Federal Unemployment			5.50	30.00			
California Income Tax			4.30	20.00			
California State Disability			2.10	12.40			
Total			72.07	418.30			
After-Tax Deductions							
Child Support			28.50	57.00			
Arrangements			13.50	28.00			
Total			42.00	85.00			
W2 Gross			231.93	200.00			
Net Pay			241.94				



REMOVE DOCUMENT ALONG THIS PERFORATION

Employee	ID	Social Security	Status	Exemptions/Allowances	Number		
CATHERINE TREMLAY	854612	XXX-XX-4444	Single	04-4/01 CA-1/01	00001001		
Code	Paygroup	Division	Department	Hire Date	Period Start	Period End	Pay Date
CHEVRON	2	1700		12/19/06	01/22/07	01/29/07	02/02/07

Earnings	Rate	Units	Current	Year To Date	Year OGE number 10-5150
Regular Hours	8.5000	24.00	204.00	204.00	
Shift Differential Field	9.0000	16.00	144.00	1,916.00	
Total			348.00	1,716.00	

Taxes	Current	Year To Date
Federal Income Tax	37.37	183.38
Social Security (FICA)	21.57	106.30
Federal Medicare	6.04	29.66
California Income Tax	4.28	21.40
California State Disability	2.09	10.30
Total	70.45	346.24

After-Tax Deductions	Current	Year To Date
Child Support	28.84	28.84
Amortization	11.54	11.54
Total	40.38	40.38

W2 Gross	348.00	1,716.00
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Net Pay	237.17
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REMOVE DOCUMENT ALONG THIS PERFORATION

Employee	ID	Social Security	State	Representative/Assignment	Number		
Chevron Station Inc.	00001	0000000000	CA	0000000000	0000000000		
Plan	Payroll	Division	Department	Plan Date	Period Start	Period End	Pay Date
0000000000	2	1750		02/01/08	02/01/08	02/01/08	02/01/08
Employee	Rate	Units	Current	Year To Date	Year To Date Number In Bill		
0000000000	0.0000	24.00	24.00	1,000.00			
0000000000	0.0000	10.00	10.00	2,000.00			
0000000000				0.00			
Total			348.00	3,114.38			
<b>Taxes</b>							
Federal Income Tax			37.27	321.88			
State Income Tax (FICA)			21.52	188.88			
Federal Medicare			5.88	48.18			
California Income Tax			4.36	36.00			
California State Disability			2.88	18.88			
Total			70.48	629.88			
<b>After-Tax Deductions</b>							
Child Support			28.84	144.28			
Amortization			11.54	57.78			
Total			40.38	201.90			
W2 Gross			348.00	3,114.38			
Net Pay			237.18				



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Employee	Payroll Number	Payroll Date	Payroll Period	Payroll Type	Payroll Status	Payroll Date	Payroll Amount
Code	Payroll	Payroll	Payroll	Payroll	Payroll	Payroll	Payroll
Code	Payroll	Payroll	Payroll	Payroll	Payroll	Payroll	Payroll
Earnings	Rate	Unit	Current	Year To Date	Direct Deposit Account	Amount	
Base Pay	8.5000	1.00	85.00	85.00	Bank of America	85.00	
Total			85.00	85.00			
Taxes					Year To Date Amount		
Federal Income Tax			12.50	12.50			
State Income Tax			1.25	1.25			
Federal Medicare			1.25	1.25			
California Medicare			1.25	1.25			
California State Disability			5.00	5.00			
Total			21.25	21.25			
Net Pay			63.75	63.75			
Net Pay			63.75	63.75			

Chevron Stations Inc. - PO BOX 3009 BOTHELL, WA 98041-3009

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Employee	SSN	Social Security	State	Exemptions/Allowances	Number		
CHRISTOPHER, TRISTAN	00441844	0-00-000000	Single	US-070 CA-000	04070070		
City	Personnel	Division	Department	Hire Date	Period Start	Period End	Pay Date
CHICAGO	2	3700		12/18/06	03/26/07	04/01/07	04/05/07
Rate	Units	Current	Year To Date	Year COE number is 1135			
Regular Hours	8.0000	18.00	180.00				
Shift Differential Pay	8.0000	24.00	240.00				
Overtime 1.5x			12.75				
Total			362.60				4,563.36
Taxes							
Federal Income Tax		37.80	374.50				
Social Security (FICA)		21.60	216.75				
Federal Medicare		5.10	50.85				
California Income Tax		4.40	43.90				
California State Disability		2.11	20.95				
Total		71.01	686.95				
After-Tax Deductions							
Starbridge Option 1 - EE + 1		18.80	188.00				
Starbridge Dental Employee + 1		7.80	77.70				
Child Support		28.84	288.40				
Arrears		11.55	115.40				
Total		66.23	457.35				
W2 Gross		362.60	4,563.36				
Net Pay		212.31					

REMOVE DOCUMENT FROM THE SYSTEM

Employee	1	Social Security	1000	1000	1000	1000	1000
CATHERINE TREMBLAY	1017	1000	1000	1000	1000	1000	1000
Code	Paygroup	Division	Department	Start Date	End Date	Period End	Pay Date
CHEVRON	2	1700		12/17/07	02/15/08	02/15/08	02/15/08
Earnings	Rate	Units	Current	Year To Date	W2 Gross Number 12 1111		
Regular Hours	4.0000	24.00	24.00	960.00			
Shift Differential Field	9.0000	12.00	12.00	108.00			
Overtime - 1.5x				9.00			
Total			348.00	2,418.36			
<b>Taxes</b>							
Federal Income Tax			27.33	258.36			
Social Security (FICA)			21.80	148.80			
Federal Medicare			5.39	35.09			
California Income Tax			1.24	36.36			
California State Disability			2.70	17.55			
Total			78.47	486.17			
<b>After-Tax Deductions</b>							
Child Support			26.84	88.56			
Averaging			17.54	34.62			
Total			44.38	123.18			
W2 Gross			348.00	2,418.36			
Net Pay			237.15				

Chevron Stations Inc. - 6001 BOLLINGER CANYON ROAD San Ramon, CA 94583

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REMOVE DOCUMENT ALONG THIS PERFORATION

Employee	ID	Social Security	State	Residence/Address	Number		
CATHERINE THRENTON	00000000	000-00-0000	CA	00-000 CA 000	00000000		
Code	Position	Division	Department	Hire Date	Period From	Period To	Pay Date
CHEVRO	2	1700		12/18/06	06/12/07	06/18/07	07/09/07
Your VCA Number is 0700							
Regular	Rate	Units	Current	Total To Date			
Regular Hours	4,000.00	20.00	800.00	800.00			
Shift Differential Rate	15.00	10.00	150.00	1,500.00			
Overtime	7.50	0.00	0.00	0.00			
Total			348.00	2,300.00			
Taxes							
Federal Income Tax			50.00	50.00			
Social Security (FICA)			51.00	171.00			
Federal Medicare			5.00	40.00			
California Income Tax			4.00	34.00			
California State Disability			2.00	16.00			
Total			76.48	550.23			
After-Tax Deductions							
Child Support			26.54	115.36			
Arrears			11.54	46.16			
Total			40.36	161.52			
W2 Gross			348.00	2,766.38			
Net Pay			287.16				

REMOVE DOCUMENT ALONG THIS PERFORATION

Employee	ID	Social Security	Status	Employment/Assignment	Number		
CHRISTINE TREMLAY	054617	SSN: 888-4444	Regular	100-000-000-000	00000000		
Code	Paygroup	Division	Department	Hire Date	Period Start	Period End	Pay Date
0000000	2	1700		12/15/00	06/01/07	06/01/07	05/15/08
Rate	Units	Current	Year To Date	YOUR GROSS MONTHLY PAY			
Hourly Rate			1,888.00				
W2 Gross Pay	2,448.00	2,448.00	2,448.00				
Overtime Pay	6.36	6.36	6.36				
Total		360.00	3,474.36				
<b>Taxes</b>							
Federal Income Tax	39.17	39.17	39.17				
Social Security (FICA)	22.35	22.35	22.35				
Federal Medicare	5.25	5.25	5.25				
California Income Tax	4.63	4.63	4.63				
California State Disability	2.15	2.15	2.15				
Total		73.48	73.48				
<b>After-Tax Deductions</b>							
Child Support	28.54	28.54	28.54				
Amalgams	11.54	11.54	11.54				
Total		40.08	40.08				
W2 Gross		360.00	3,474.36				
Net Pay			246.15				



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Employee	ID	Social Security	Status	Exemptions/Allowances	Number					
CATHERINE TREMBLAY	054017	XOX-XO-1148	Single	US-6/00 CA-0/00	04/01/00					
Code	Paygroup	Division	Department	Hire Date	Period Start	Period End	Pay Date			
CHEVRON	2	1750		12/19/99	09/05/02	09/11/02	09/19/02			
Your CCE number is 5153										
Rate	Units	Current	Year To Date							
Regular Rate	\$ 50.00	24.00	204.00	1,224.00						
Shift Differential Paid	\$ 0.00	18.00	144.00	2,592.00						
Overtime - 1 hr				0.00						
Total		348.00	3,622.38							
Taxes										
Federal Income Tax		57.37	410.22							
Social Security (FICA)		21.58	206.96							
Federal Medicare		5.04	55.42							
California Income Tax		4.38	48.06							
California State Disability		2.08	22.93							
Total		70.45	773.63							
After-Tax Deductions										
Child Support		28.84	261.66							
Arrearages		11.54	80.78							
Total		40.38	282.66							
W2 Gross		348.00	3,622.38							
Net Pay 237.17										

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Employee	ID	Social Security	Status	Exemptions/Allowances	Marital		
CATHERINE J. CHILKOTY	034612	XXX-XX-XXXX	Single	US-0/0 CA-0/0	Married		
Code	Paygroup	Division	Department	Hire Date	Period Start	Period End	Pay Date
CHILKOTY	2	1700		12/18/00	03/19/02	03/26/02	03/26/02

Employee	Rate	Unit	Current	Year To Date	Year Code number in 155
Regular Hours	8.0000	23.00	184.00	7,887.70	
Shift Differential Paid	0.0000	10.00	140.00	2,800.00	
Overtime - 1.5x	12.0000	8.00	96.00	76.80	
<b>Total</b>			<b>354.63</b>	<b>4,531.38</b>	

Taxes		
Federal Income Tax	50.37	400.98
State Security (FICA)	21.30	200.00
Federal Medicare	5.10	60.72
California Income Tax	4.51	67.02
California State Disability	2.15	27.18
<b>Total</b>	<b>72.15</b>	<b>917.65</b>

After-Tax Deductions		
Starbridge Option 1 - EE + 1	19.85	38.80
Starbridge Dental Employee + 1	7.60	15.80
Child Support	28.84	200.56
Averaging	11.54	103.88
<b>Total</b>	<b>68.23</b>	<b>419.12</b>

<b>W2 Gross</b>	<b>354.63</b>	<b>4,531.38</b>
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<b>Net Pay</b>	<b>214.25</b>
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Employee	ID	Social Security	Status	Exemptions/Allowances	Number		
CATHERINE TRENKLE	054517	XXX-XX-4145	Single	UNE-0/0 CA-0/0	04000000		
Code	Paygroup	Division	Department	Hire Date	Period Start	Period End	Pay Date
CATERING	2	1750		12/18/06	09/12/07	09/18/07	09/23/07
Position	Rate	Units	Current	Year To Date	Your GCE number is 1133		
Regular Hours	\$ 19.00	24.00	204.00	1,456.00			
State Unemployment Fund	\$ 0.0000	18.00	180.00	2,736.00			
Overtime 1.5x	12.7500	8.00	6.30	12.75			
<b>Total</b>			<b>354.30</b>	<b>4,176.75</b>			
<b>Taxes</b>							
Federal Income Tax			56.33	448.56			
Social Security (FICA)			21.87	258.24			
Federal Medicare			5.19	66.58			
California Income Tax			4.50	52.56			
California State Disability			2.13	20.06			
<b>Total</b>			<b>72.07</b>	<b>645.70</b>			
<b>After-Tax Deductions</b>							
Starbridge Option 1 - EE + 1			19.95	19.95			
Starbridge Dental Employee + 1			7.90	7.90			
Child Support			28.84	230.72			
Amalgams			11.54	92.32			
<b>Total</b>			<b>68.23</b>	<b>350.89</b>			
<b>W2 Gross</b>			<b>354.30</b>	<b>4,176.75</b>			
<b>Net Pay</b>			<b>214.08</b>				